



## **Functional Rehabilitation Medicine**

Spine, Sports, Occupational, and Electrodiagnostic Medicine  
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### **Physiatry Evaluation**

**Alan Friedman, M.D.**

Name: **Pnina Greenfield**

Date of Evaluation: July 11, 2022

Date of Injury: March 19, 2016

Location: The examination was performed as a telemedicine evaluation.

### **HISTORY**

Pnina Greenfield (date of birth, March 28, 1958) is a 64 year-old right-handed woman who at the time of the injury on March 19, 2016 was 57 years old.

Mrs. Greenfield, her husband, and her sister were on a tour in Turkey in March 2016. They were walking through the streets of Istanbul with their tour guide. Mrs. Greenfield states that she remembers that there were not many people on the street that day. She was walking slightly ahead of the group, walking backwards so that she was able to take photos of the group, and recalls hearing a whistle “similar to a storm” and felt “little stones and wind near my foot” then a “loud boom”. She felt a hot sensation in her left foot. She did not fall or lose consciousness. Her sister was screaming but she remembers thinking that “I was just in a terrorist attack” but forced herself to keep walking. She went to a small mall where she then found her husband. People gave her water to drink while she waited for an ambulance.

She had shrapnel embedded in her left foot. Specifically, the head of a screw was lodged in the foot – the entry was in the middle of the foot and extended until near the small toe. She was taken by ambulance to a hospital where the wound was irrigated. An Israeli military plane then transferred her back to Israel. She went directly from the airport to Sheba Hospital, Tel Ha’Shomer. She was hospitalized for one week during which the shrapnel was removed. Vacuum assisted closure (VAC) was used for wound healing, and she used the VAC for a number of months following discharge from the hospital. She was discharged home on March 27, 2016. She continued to receive physical therapy at least twice a week for 3 to 4 months.

### **SYMPTOMS AT THIS TIME**

#### **Left foot:**

She reports that she walks with a limp of the left foot. She states this has mostly improved and usually does not bother her. Her gait is normal overall. However, she is unable to run because of the limp and still has mild pain if she does run. She denies any

pain when not running. She does, sometimes get swelling and states that she has a “hole” in the left foot. She gets intermittent numbness in both legs - the left is worse than the right. However, this only occurs on rare occasions and lasts for a few seconds.

Nightmares:

She has had nightmares since the bombing. We did not get into details as it is beyond the realm of my specialty.

**TREATMENTS RECEIVED**

Physical therapy: At least twice a week for 3-4 months.

Chiropractic: None.

Injections: None.

DME: None.

**REVIEW OF RECORDS**

None provided.

**OCCUPATIONAL HISTORY**

She used to work as a medical secretary but stopped working a few months prior to the injury. She did return to work part-time for approximately 6 months but then stopped and has not worked since then.

**PAST MEDICAL/ SURGICAL HISTORY**

Hypertension, hyperlipidemia, anxiety, and one caesarian section.

**ALLERGIES**

No known drug allergies.

**MEDICATIONS**

Sertraline, Co-Diovan (valsartan/hydrochlorothiazide).

**SOCIAL HISTORY**

She lives with her husband. She denies tobacco or alcohol use.

**FAMILY HISTORY**

There is no history of neurologic or orthopedic disease.

### **FUNCTIONAL STATUS**

She is independent with ambulation and her activities of daily living.

### **REVIEW OF SYSTEMS**

She denies the presence of any chest pain, shortness of breath, nausea, dysuria, fevers, tremors, flushing, bruising, rashes, blurry vision, or tinnitus.

### **PHYSICAL EXAMINATION**

(Performed via video conference. She had told me that since her symptoms are minimal she did not feel that she needed to travel a long distance for this evaluation.).

Physical examination reveals a woman, well developed and well nourished. She is in no acute distress.

*Gait:* Gait is heel-to-toe with good balance. She is able to walk on her heels and toes, and squat. When trying to stand one-legged on the left, she is unable to do so. Her balance is poor and she is unable to maintain standing on the one leg. She is able to stand one-legged on the right.

*Range of Motion:*

Knees: Flexion is 135/135 degrees.

Ankles: Plantarflexion is 50/50 degrees and dorsiflexion is 20/20 degrees.

*Scars:* There is a well-healed linear scar along the lateral left foot. She says it is 2-3cm (she measured it during the exam)..

*Neurologic:* She is alert and oriented to person, place, & time. There are no fasciculations noted. Speech is normal. Cerebellar testing is normal. There is no clonus. Romberg's test is negative. Proprioception is normal.

### **DIAGNOSES**

1. Status-post shrapnel injury to the left foot.
2. Gait abnormality.
3. Balance deficit.
4. Scar – left foot.

### **CAUSALITY**

If the history obtained is accurate and true, it is my opinion based on a reasonable degree of medical certainty that her symptoms are causally related to the attack of March 19, 2016.

**CONCLUSIONS**

Mrs. Greenfield was injured in a blast attack on March 19, 2016. She suffered a shrapnel wound to the left foot. She currently has only minimal physical symptoms, but had more severe pain and gait abnormalities earlier in her course. Due to the time since the injury and her age, no significant improvement can be expected in the future.

*I, Alan Friedman, being a physician duly licensed to practice medicine hereby affirm under the penalties of perjury that the statements contained herein are true and accurate.*

A handwritten signature in black ink, appearing to read 'Alan Friedman', with a stylized, cursive script.

Alan Friedman, M.D., FAAPMR  
Board Certified, Physical Medicine & Rehabilitation

